

STATE OF TENNESSEE DEPARTMENT OF COMMERCE AND INSURANCE STATE FIRE MARSHAL'S OFFICE CODES ENFORCEMENT SECTION MODULAR BUILDING PROGRAM

Davy Crockett Tower 500 James Robertson Parkway Nashville, Tennessee 37243-1162 Phone (615) 741-7190 FAX: (615) 253-3267

http://tn.gov/commerce/sfm/modindex.html

TENNESSEE MODULAR BUILDING UNIT MONTHLY PRODUCTION REPORTS (ADJUSTMENT REPORT FOR FORM "A") INSTRUCTIONS

All Tennessee Modular Building Unit Manufacturers <u>MUST</u> complete and submit to this office a Monthly Production Report (Adjustment Report for Form "A") if there is any revised information on previously reported modular building unit(s) and/or component(s). The Monthly Production Report (Adjustment Report for Form "A") is due to this office no later than the tenth (10th) of each month.

Instructions:

- 1. Enter the date of the Form "A" which is being adjusted.
- 2. Enter the Construction Inspection Agency.
- 3. Enter the Manufacturer's facility name and the <u>complete site address</u> of the manufacturing facility.
- 4. Print the name, and provide the signature, of the Manufacturer's Authorized Representative.
- 5. Use <u>Section I</u> to add an unreported unit, one that was previously manufactured, but left off of the previously submitted Monthly Production Report (Form "A").
- 6. Enter the Tennessee Modular Building Unit Certification Label number.

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- 7. Enter the Manufacturer's Serial Number of the modular building unit and/or component.
- 8. Enter the <u>TENNESSEE MODULAR MODEL PLAN NUMBER</u> of the modular building unit and/or component as <u>SUBMITTED TO THIS OFFICE FOR FILING.</u>
- 9. Enter the Licensed Modular Building Unit Dealer's name.
- 10. Enter the Licensed Modular Building Unit Dealer's License Number.
- 11. Enter the Consumer's name or information.
- 12. Enter the Tennessee Modular Building Unit destination, street address, city, and state.
- 13. Use <u>Section II</u> to correct previously reported information which for some reason was incorrect. Enter all information AS IT SHOULD HAVE BEEN REPORTED.
- 14. Enter the Tennessee Modular Building Unit Certification Label number.
- 15. Enter the Manufacturer's Serial Number of the modular building unit and/or component.
- 16. Enter the <u>TENNESSEE MODULAR MODEL PLAN NUMBER</u> of the modular building unit and/or component as <u>SUBMITTED TO THIS</u> OFFICE FOR FILING.
- 17. Enter the Licensed Modular Building Unit Dealer's name.
- 18. Enter the Licensed Modular Building Unit Dealer's License Number.
- 19. Enter the Consumer's name or information.
- 20. Enter the Tennessee Modular Building Unit destination, street address, city, and state.
- 21. Use **Section III** to report the shipment of units which were not shipped the month they were manufactured.
- 22. Enter the Tennessee Modular Building Unit Certification Label number.

- 23. Enter the Manufacturer's Serial Number of the modular building unit and/or component.
- 24. Enter the <u>TENNESSEE MODULAR MODEL PLAN NUMBER</u> of the modular building unit and/or component as <u>SUBMITTED TO THIS</u> <u>OFFICE FOR FILING.</u>
- 25. Enter the Licensed Modular Building Unit Dealer's name.
- 26. Enter the Licensed Modular Building Unit Dealer's License Number.
- 27. Enter the Consumer's name or information.
- 28. Enter the Tennessee Modular Building Unit destination, street address, city, and state.
- 29. Follow the instructions located at the bottom of the form for copy distribution.

All items on the form <u>MUST</u> be completed prior to mailing application. If an item does not apply, simply put <u>N/A</u> or <u>None</u> in that space. Any blank spaces will result in a delay in processing and may require additional information.

If you have any questions regarding this procedure, feel free to call this office at (615) 741-7190.

STATE OF TENNESSEE ADJUSTMENT REPORT FOR FORM "A"

Month/Year of Form "A" Adjusted:			20		CIA Code:				
Man	ufacturer's Facility N	lame:							
Man	ufacturing Facility A	ddress:							
	,		(Address)	(City)		(State)		(Zip Code)	
Auth	orized Representativ	ve's Signature:							
		NOTE	E: LIST ONLY ADJ	USTMENTS FOR TH	E MONTH/YE	AR LISTED ABOVE			
Sect	ion I (To ADD an unre	eported Modular Buil	ding Unit(s))						
	Label Number	Manufacturer's	Plan Number	Tennessee	Dealer's		Modular Unit	Modular Unit	
No.	(Include all zeros)	ID or Serial Number	(As shown on Plan)	Licensed Modular Dealer	License Number	Consumer Info.	Destination, Street Address	Destination, City and State	
(1)			,					,	
(2)									
(3)									
(4)									
Sect	ion II (To CORRECT	previously reported i	information on Mod	dular Building Unit(s))	I	1	l .		
	Label Number	Manufacturer's	Plan Number	Tennessee	Dealer's		Modular Unit	Modular Unit	
No.	(Include all zeros)	ID or Serial	(As shown	Licensed	License	Consumer Info.	Destination,	Destination,	
(1)		Number	on Plan)	Modular Dealer	Number		Street Address	City and State	
(2)									
(3)									
(4)									
	ion III (To COMPLET	<u> </u> F "Onen" Destination	l ns on previously re	<u>l</u> ported Modular Buildin	a Unit(s))				
-	Label Number	Manufacturer's	Plan Number	Tennessee	Dealer's		Modular Unit	Modular Unit	
No.	(Include all zeros)	ID or Serial	(As shown	Licensed	License	Consumer Info.	Destination,	Destination,	
		Number	on Plan)	Modular Dealer	Number		Street Address	City and State	
(1)									
(2)									
(3)									
(4)									
Atton	ion Manufacturer								

^{1.} Please type or print legibly in blue or black ink. 2. ALL columns must be complete. 3. Copy Distribution: Original to Department, Copy to Construction Inspection Agency, Copy to Manufacturer's File IN-1085 (Rev 11/06) RDA 2225